



STATE OF CONNECTICUT DEPARTMENT OF PUBLIC SAFETY
Division of Fire Building and Emergency Services
Office of Education and Data Management
1111 Country Club Road
Middletown, Connecticut 06457-2389

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APPLICATION TO CHALLENGE FIRE MARSHAL / INSPECTOR CERTIFICATION

PLEASE TYPE OR PRINT CLEARLY. COMPLETE APPLICATION IN ITS ENTIRETY. RETURN COMPLETED APPLICATION TO THE ABOVE ADDRESS. CHECK ONLY THE CLASS OF CERTIFICATION WHICH YOU ARE CHALLENGING.

☐ FIRE MARSHAL ☐ DEPUTY FIRE MARSHAL ☐ FIRE INSPECTOR ☐ FIRE SAFETY CODE INSPECTOR
☐ HAZARDOUS MATERIALS INSPECTOR ☐ FIRE INVESTIGATOR

HAVE YOU TAKEN THIS EXAM PREVIOUSLY? ☐ YES / ☐ NO

Section 1-217 of the Connecticut General Statutes exempts the residential addresses of a number of occupational categories from release to the public under the Freedom of Information Act. Such categories include, but are not limited to, police officers, firefighters and employees of the Department of Correction. If you believe that your residential address is exempt under this law, please make a check mark in the box: ☐

APPLICANT			
LAST NAME	FIRST NAME	MIDDLE INITIAL	APPLICATION DATE
HOME ADDRESS	TOWN	STATE	ZIP CODE
ID#: _____ - _____ Example: <u>ABC</u> - <u>1234</u> Your ID # is the first 3 letters of your last name and the last 4 digits of your SS #.		DATE OF BIRTH: _____ Month / Day / Year	
<u>DAY</u> PHONE NUMBER / <i>EXTENSION</i>		BUSINESS PHONE NUMBER / <i>EXTENSION</i>	
HOME PHONE NUMBER		CELL PHONE / PAGER NUMBER	
E – MAIL ADDRESS - <i>Please type or print clearly</i>			
EDUCATIONAL BACKGROUND			
NAME OF HIGH SCHOOL / VOCATIONAL SCHOOL (NAME DISCIPLINE) ATTENDED:			
SUCCESSFULLY COMPLETED <input type="checkbox"/> YES / <input type="checkbox"/> NO		IF "G.E.D.", DATE SUCCESSFULLY COMPLETED:	
CIRCLE THE NUMBER THAT REFLECTS THE HIGHEST LEVEL OF YOUR FORMAL EDUCATION:			
COLLEGE: 13 14 15 16		POST GRADUATE: 17 18 19 20	
THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE.			
_____ APPLICANT SIGNATURE		_____ DATE	
<u>REQUIRED ENCLOSURES:</u>			
LIST OF SUCCESSFULLY COMPLETED COURSES TO BE CONSIDERED FOR EQUIVALENCY, INCLUDING: A) DATES ATTENDED AND TOTAL NUMBER OF COURSE HOURS. B) SYLLABUS IDENTIFYING COURSE CONTENT. C) PROOF OF SUCCESSFUL COMPLETION FOR EACH COURSE TO BE CONSIDERED, INCLUDING A COPY OF CERTIFICATE OR AN OFFICIAL TRANSCRIPT.			